

PTO/SB/21 (09-04)
Approved for use through 07/31/2008; OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

17

Application Number

10/089,831

Filing Date

April 4, 2002

First Named Inventor

Levin

Art Unit

3767

Examiner Name

M. Hayes

Attorney Docket Number

BET-105US

RECEIVED
CENTRAL FAX CENTER
JUL 17 2008

ENCLOSURES (Check all that apply)

☐ Fee Transmittal Form

☐ Fee Attached

☒ Amendment/Reply

☐ After Final

☐ Affidavits/declaration(s)

☐ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☐ Reply to Missing Parts/
Incomplete Application
☐ Reply to Missing Parts
under 37 CFR 1.52 or 1.53

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a
Provisional Application

☐ Power of Attorney, Revocation

☐ Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) _____

☐ Landscape Table on CD

☐ After Allowance Communication to TC

☐ Appeal Communication to Board
of Appeals and Interferences

☐ Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☐ Other Enclosure(s) (please identify
below):

Remarks

Papers transmitted herewith:

1. Transmittal Form (PTO/SB/21; 1 page; this page)
2. Amendment (16 pages)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name Maurice M. Klee, Ph.D.

Signature *Maurice Klee*

Printed name Maurice M. Klee, Ph.D.

Date July 17, 2006

Reg. No.

30,399

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature *Maurice Klee*

Typed or printed name

Maurice M. Klee, Ph.D.

Date

July 17, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED
CENTRAL FAX CENTER

002

JUL 17 2006

[273] Attorney Docket No. : BET-105US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Nathan W. Levin, Daniel Schneditz, and Fansan Zhu
Appl. No. : 10/089,831
Filed : April 4, 2002
For : METHODS AND APPARATUS FOR MEASURING THE
VOLUME OF FLUID IN THE PERITONEAL CAVITY
Examiner : M. Hayes
Group : 3767

AMENDMENT

This Amendment is submitted in response to the Office Action dated April 17, 2006. Its contents are:

- (1) a listing of the claims of the application which includes the amendments to the claims being made by this Amendment -- page 2; and
- (2) applicants' Remarks -- page 15.

No extension of time is believed to be necessary for the filing of this Amendment, but if an extension of time is required, applicants request that this be considered a petition therefor. The Director is hereby authorized to charge any fees which may be required for such an extension to Deposit Account No. 11-1158.

BEST AVAILABLE COPY